

**AMENDMENTS TO THE CLAIMS**

Following is a complete set of claims as amended with this Response. This complete set of claims excludes cancelled claims 1-14 and 36.

1-14. (Cancelled)

15. (Original) An implantable cardiac device comprising:  
circuitry to sense whether a patient is in intrinsic rhythm when transitioning from a less upright posture to a more upright posture; and

a processor to promote intrinsic rhythm of the patient's heart by:

- (i) in an event that the circuitry senses the patient is not in intrinsic rhythm, applying increased pacing to counter effects of orthostatic hypotension caused by the transition from the less upright posture to the more upright posture; and
- (ii) in an event that the circuitry senses the patient is in intrinsic rhythm, disabling increased pacing for a programmed duration.

16. (Original) An implantable cardiac device as recited in claim 15, wherein the circuitry comprises at least one of an activity sensor, an accelerometer, and a respiration sensor to sense the condition indicative of non-reset.

17. (Original) An implantable cardiac device as recited in claim 15, wherein the programmed duration is approximately 5-120 seconds.

18. (Original) An implantable cardiac device as recited in claim 15, wherein the increased pacing is applied according to an orthostatic response algorithm.

19. (Original) An implantable cardiac device as recited in claim 15, wherein the processor applies increased pacing after the programmed duration expires.

20. (Original) An implantable cardiac device comprising:  
detection means for detecting whether a patient is in intrinsic rhythm when transitioning from a first posture to a second posture, where the second posture is more upright than the first posture; and  
responsive to the transition in posture, compensation means for temporarily disabling, for a programmed duration, application of increased pacing to counter effects of orthostatic hypotension if the patient is in intrinsic rhythm and subsequently applying, after expiration of the programmed duration, a pacing therapy.

21. (Original) An implantable cardiac device as recited in claim 20, wherein the programmed duration is approximately 5-120 seconds.

22. (Original) An implantable cardiac device as recited in claim 20, wherein the compensation means applies a pacing therapy that includes increased pacing.

23. (Original) An implantable cardiac device as recited in claim 20, wherein the compensation means applies a pacing therapy that includes decreased pacing.

24. (Original) An implantable cardiac device as recited in claim 20, wherein the compensation means applies increased pacing without delay if the patient is not in intrinsic rhythm.

25. (Original) An implantable cardiac device having a memory and a processor, the cardiac device being programmed to perform tasks comprising countering orthostatic hypotension by disabling, for a programmed duration, application of increased pacing to a patient who is in intrinsic rhythm when transitioning from a first posture to a second posture that is more upright than the first posture.

26. (Original) An implantable and programmable cardiac device as recited in claim 25, further programmed to perform tasks comprising subsequently applying the increased pacing after the programmed duration lapses.

27. (Original) A method implemented by an implantable cardiac device, comprising:

sensing when a patient transitions from a less upright posture to a more upright posture; and

disabling increased pacing responsive to the transition if the patient's heart is in intrinsic rhythm.

28. (Original) A method as recited in claim 27, wherein the sensing comprises monitoring at least one of a respiration-related parameter, an activity variance, or a position-related parameter.

29. (Original) A method as recited in claim 27, wherein the sensing comprises determining when the patient, who is at rest, exhibits indicia of non-rest.

30. (Original) A method as recited in claim 27, wherein said disabling is for a programmed duration, and further comprising administering increased pacing after expiration of the programmed duration.

31. (Original) A method as recited in claim 27, wherein said disabling is for a programmed duration, and further comprising administering decreased pacing after expiration of the programmed duration.

32. (Original) A method comprising:  
when a patient is at rest, determining whether the patient's heart is in intrinsic rhythm;  
detecting a condition indicative of non-rest;  
if the patient's heart is not in intrinsic rhythm, administering increased pacing upon detection of the condition to counter effects of orthostatic hypotension; and  
if the patient's heart is in intrinsic rhythm, disabling administration of the increased pacing for a programmed duration.

33. (Original) A method as recited in claim 32, wherein the detecting comprises monitoring the patient's position.

34. (Original) A method as recited in claim 32, wherein the detecting comprises monitoring patient activity.

35. (Original) A method as recited in claim 32, further comprising subsequently increasing pacing after the programmed duration expires.

36. (Cancelled)